SENDER: COMPLETE THIS SECTION IEF-CSC	COMPLETE THIS SECTION ON DELIVERY 13/2008
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the riverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>Article Addressed to:</li> <li>Capell &amp; Howard, P.C.</li> <li>150 South Perry Street</li> <li>PO Box 2069</li> <li>Montgomery, Alabama 36102-2069</li> </ul> </li> </ul>	A Signature  Agent Addressee  Addressee  D. Is delivery address different from item If YES, enter delivery address different from item No  Agent Addressee  No  Addressee  No  Addressee  Addressee
	3. Service Type  Grentfled Mall  Repress Mall  Repress Marine Report for Membradice
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
Article Number 7 [ ]  (Transfer from service label)	4 1160 0004 9763 0844
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

(Transfer from service label)
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540